

# TRANSMITTAL FORM

Application Number	09/779,114
Filing Date	February 8, 2001
First Named Inventor	Lawrence Shields
Group Art Unit	3693
Examiner Name	Jagdish Patel
Attorney Docket No.	74622-040
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

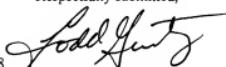
<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)  <input type="checkbox"/> Replacement Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction  <input type="checkbox"/> Certificate of Correction  <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input type="checkbox"/> Return Receipt Postcard  <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)  <input checked="" type="checkbox"/> Form PTOL-85, Fee(s) Transmittal for payment of Issue Fee and Publication Fee
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]</li> </ul>		
<input type="checkbox"/> Petition for Extension of Time		
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
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## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
 Proskauer Rose LLP  
 One International Place  
 Boston, MA 02110-2600  
 Tel. No.: (617) 526-9600  
 Fax No.: (617) 526-9899

## SIGNATURE BLOCK

Respectfully submitted,



Todd A. Gerety  
 Attorney for the Applicants  
 Proskauer Rose LLP  
 One International Place  
 Boston, MA 02110-2600